

ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708 Website: www.nvsos.gov

Customer Order Instructions

Service Requeste	ed: Regular	24-Hour Exped	lite (additional fee included)
SUBMIT THIS COMPLETED FORM WI	ITH YOUR FILING	USE BL	ACK INK ONLY - DO NOT HIGHLIGHT
Name of Entity:			Date:
Return to:			
Contact Name:		Phone:	
Return Delivery (mark one)	FedEx: Account	:#	
☐ Hold for Pick Up	☐ Mail to Address A	bove Other (expla	in below)
Order Description (include	le items being ordered and fee brea	ıkdown)*:	
stamped copy ordered at the ti	eps the original paperwork. The first ime of filing is at no charge. Each age (plus \$30.00 for each certification	Total Amou	int:
Method of Payment:			
☐ Check/Money Order	eCheck/Credit Card (a	attach checklist) Trust	Account
☐ Use balance remain	ning in job #		